

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Location or Docket Number

*10/009-723*

## CLAIMS AS FILED - PART I

SMALL ENTITY  
TYPE ☐

OR OTHER THAN  
SMALL ENTITY

|   | (Column 1)           | (Column 2)   |  |
|---|----------------------|--------------|--|
| TOTAL CLAIMS  |                      |              |  |
| FOR   | NUMBER FILED         | NUMBER EXTRA |  |
| TOTAL CHARGEABLE CLAIMS                                   | <i>65</i> minus 20 = | * <i>45</i>  |  |
| INDEPENDENT CLAIMS  | <i>6</i> minus 3 =   | * <i>3</i>   |  |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |                      |              |  |

| RATE      | FEE |
|-----------|-----|
| BASIC FEE |     |
| X\$ 9=    |     |
| X42=      |     |
| +140=     |     |
| TOTAL     |     |

| RATE      | FEE |
|-----------|-----|
| BASIC FEE |     |
| X\$18=    |     |
| X84=      |     |
| +280=     |     |
| TOTAL     |     |

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

SMALL ENTITY

OR OTHER THAN

|             | (Column 1)  |                                  | (Column 2) |                                    | (Column 3)    |
|-------------|---|----------------------------------|------------|------------------------------------|---------------|
| AMENDMENT A |   | CLAIMS REMAINING AFTER AMENDMENT |            | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total   | * <i>10</i>                      | Minus      | ** <i>65</i>                       | = <i>8</i>    |
|             | Independent   | * <i>1</i>                       | Minus      | *** <i>6</i>                       | = <i>8</i>    |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |            |                                    |               |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 9=           |                |
| X42=             |                |
| +140=            |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$18=           | <i>2</i>       |
| X84=             |                |
| +280=            |                |
| TOTAL ADDIT. FEE |                |

|             | (Column 1)  |                                  | (Column 2) |                                    | (Column 3)    |
|-------------|---|----------------------------------|------------|------------------------------------|---------------|
| AMENDMENT B |   | CLAIMS REMAINING AFTER AMENDMENT |            | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total   | *                                | Minus      | **                                 | =             |
|             | Independent   | *                                | Minus      | ***                                | =             |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |            |                                    |               |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 9=           |                |
| X42=             |                |
| +140=            |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$18=           |                |
| X84=             |                |
| +280=            |                |
| TOTAL ADDIT. FEE |                |

|             | (Column 1)  |                                  | (Column 2) |                                    | (Column 3)    |
|-------------|---|----------------------------------|------------|------------------------------------|---------------|
| AMENDMENT C |   | CLAIMS REMAINING AFTER AMENDMENT |            | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total   | *                                | Minus      | **                                 | =             |
|             | Independent   | *                                | Minus      | ***                                | =             |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |            |                                    |               |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 9=           |                |
| X42=             |                |
| +140=            |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$18=           |                |
| X84=             |                |
| +280=            |                |
| TOTAL ADDIT. FEE |                |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.